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APPLICANTS

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** CONTINUING DATA *****

This application is a 371 of PCT/EP03/08149 07/23/2003

** FOREIGN APPLICATIONS *****

UNITED KINGDOM 0217199.9 07/25/2002
 UNITED KINGDOM 0227145.0 11/21/2002

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 9	TOTAL CLAIMS 37	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance				
Verified and Acknowledged Examiner's Signature Initials				

ADDRESS

23347

TITLE

Medicament dispenser

FILING FEE RECEIVED 2310	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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